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54953 7590 10/18/2011 BROOKS, CAMERON & HUEBSCH, PLLC

FILING DATE

CMALL ENTITY

1221 NICOLLET AVENUE SUITE 500

MINNEAPOLIS, MN 55403

APPLICATION NO

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electronically

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Miller (Signal) December 6 (Date FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO

DATEDIN

10/664.595 09/19/2003 Timothy A.M. Chuter 06-00934US02[209.0770001] 2657 TITLE OF INVENTION: MODULAR STENT-GRAFT FOR ENDOVASCULAR REPAIR OF AORTIC ARCH ANEURYSMS AND DISSECTIONS

ALTEN, TITE	Dimile Birries	ISOULTED DOL	TOBLICATION THE DOL	TRET. TAID IDDOLTER	TOTALTERATION	DATEBOE
nonprovisional	NO	\$1740	\$300	\$0	\$2040	01/18/2012
EXAM	IINER	ART UNIT	CLASS-SUBCLASS			
STROUD, JO	ONATHAN R	3774	623-001130			
I. Change of correspondence address or indication of "Fee Address" (37 CR 1.53).  Clange of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  *Fee Address" indication (or "Fee Address" indication form PTO/SB/12 attached.  Number is required.		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agento SR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		cr. 21221 Nicolle	Brooks, Cameron + Huebsch, Pluc 21221 Nicollet Avenue, Suite 500 3 Minneapolis, MN 55403	
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						

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PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Endovascular Technologies, Inc. Santa Clara CA

Please check the appropriate assignee category or eategories (will not be printed on the patent): 🗓 Individual 💆 Corporation or other private group entity 🗓 Government

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